

Docket No. 4774-111 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Sir:

In response to a Decision Refusing Status Under 37 C.F.R. § 1.47(a) mailed August 24, 2004, Applicant hereby submits a Request for Reconsideration of Petition Under 37 C.F.R. § 1.47(a), and all requisite fees.

The Decision indicates that the previously submitted Petition lacked proof that the non-signing inventor cannot be reached or located, notwithstanding diligent effort, or refuses to sign the oath or declaration having been presented with the application papers (specification, claims and drawings).

Applicant submits herewith a copy of a letter dated September 7, 2004, addressed to Todd Leonard, the non-signing inventor in the instant application, evidencing that Mr. Leonard

10/22/2004 MAHME1 00000078 10706792
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has been provided with a copy of the application specification, claims and drawings, as well as the Declaration and Power of Attorney for Patent Application form by Registered Mail. A copy of the letter dated September 7, 2004, the U.S. Postal Service Certified Mail Receipt and Registered mail postcard are attached herewith as Exhibit A. Exhibit B is a copy of the return postcard for Registered mail executed by Todd Leonard on September 10, 2004.

Applicant believes that Item 1 of the Decision mailed August 24, 2004 has been satisfied. The Registered mail postcard executed by Todd Leonard on September 10, 2004 proves that Mr. Leonard has been presented with a copy of the application papers, i.e., specification, claims and drawings, and the Declaration and Power of Attorney for Patent Application form. As Mr. Leonard has further remained silent with regard to executing the Declaration and Power of Attorney Form and providing a copy of same to either this attorney's office or to ProUroCare, Inc., it is our belief that Mr. Leonard refuses to sign the Declaration and Power of Attorney Form for filing with the United States Patent and Trademark Office.

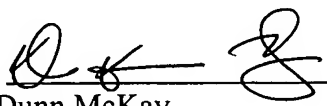
Applicant submits that the last known address of joint inventor, Todd E. Leonard is 11650 Timberline Road, Minnetonka, MN 55305.

Applicant respectfully requests that the Commissioner grant a Petition Pursuant to 37 C.F.R. § 1.47 as Applicant has made several attempts to contact Todd Leonard, who has refused to sign and return the Declaration and Power of Attorney.

Pursuant to 37 C.F.R. § 1.17(h), Applicants enclose herewith the requisite fee. Please credit any overpayments or charge any additional fees to Deposit Account No. 13-2165.

Respectfully submitted,

Dated: October 18, 2004


Diane Dunn McKay
Reg. No. 34,586
Attorney for Applicant

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CHRISTOPHER CASIERI

H. HUME MATHEWS (1911-1989)

PATENTS
TRADEMARKS
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UNFAIR COMPETITION
LICENSING
COMPUTER AND HIGH
TECHNOLOGY MATTERS
RELATED LITIGATION

September 7, 2004

VIA REGISTERED MAIL

Todd Leonard
11650 Timberline Road
Minnetonka, MN 55305

RE: U.S. Patent No. 10/706,792
INTELLIGENT MEDICAL DEVICE BARRIER
Our Ref. 4774-111 US

Dear Todd:

Enclosed please find a copy of the above-referenced patent application, including a copy of the specification, claims and Abstract and three (3) sheets of drawings, filed November 12, 2003 with the United States Patent and Trademark Office.

We also enclose herewith a Declaration and Power of Attorney for Patent Application form for your execution. As you are aware, the above-identified patent application was filed with an unexecuted Declaration and Power of Attorney form. It is therefore necessary, at this time, to submit a fully executed Declaration and Power of Attorney to the United States Patent and Trademark Office. The fully executed Declaration and Power of Attorney form must be submitted before October 24, 2004.

Please execute the enclosed Declaration and Power of Attorney for Patent Application form where indicated and return same to us for filing prior to the **October 24, 2004** deadline. Please be aware that this deadline is non-extendible.

MATHEWS, COLLINS, SHEPHERD & MCKAY, P.A.

Todd Leonard
September 7, 2004
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We look forward to receiving the fully executed Declaration and Power of Attorney for Patent Application form. Should you have any questions or comments, please do not hesitate to contact us.

Very truly yours,

MATHEWS, COLLINS, SHEPHERD & MCKAY, P.A.


DIANE DUNN MCKAY

DDM/cns
Enclosure

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE

CERTIFIED MAIL



6522 5558 E000 029T 0002
6522 5558 E000 029T 0002

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
Postage \$ <u>1.06</u>	
Certified Fee <u>2.30</u>	
Return Receipt Fee (Endorsement Required) <u>1.75</u>	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$ <u>5.11</u>	
Sent To <u>Todd Leonard</u>	
Street, Apt. No., or PO Box No. <u>11650 Timberline Road</u>	
City, State, ZIP+4 <u>Minnetonka, MN 55305</u>	
PS Form 3800, May 2000 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to:</p> <p>Todd Leonard 11650 Timberline Road Minnetonka, MN 55305</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label) <u>7000-1670-0003-8358-2739</u></p> <p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540</p>		<p>D. Is delivery address different from item 17? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Todd Leonard
11650 Timberline Road
Minnetonka, MN 55305

2. Article Number

(Transfer from service label)

7000-1670-0003-8353-2739

PS Form 3811, August 2001

COMPLETE THIS SECTION ON DELIVERY**A. Signature**

[Signature] ☐ Agent
☐ Addressee

B. Received by (Printed Name)

TODD LEONARD

C. Date of Delivery

9/7/04

D. Is delivery address different from item 1? ☐ Yes**If YES, enter delivery address below: ☐ No****3. Service Type**

- ☐ Certified Mail ☐ Express Mail
☒ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)☐ Yes

Domestic Return Receipt

102595-02-M-1540

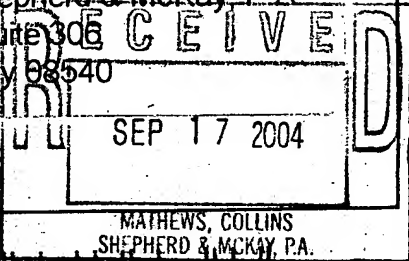
UNITED STATES POSTAL SERVICE



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- Sender: Please print your name, address, and ZIP+4 in this box •

Diane Dunn McKay, Esq.
Mathews, Collins, Shepherd & McKay, P.A.
100 Thanet Circle, Suite 306
Princeton, New Jersey 08540



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